INSTRUCTIONS FOR OBTAINING A MARRIAGE RECORD

The Division of Vital Records can issue copies of marriage records only for marriages that occurred in North Dakota. We have records on file starting with **July 1, 1925**, to the present. The county recorder for the county in which the license was issued has records prior to July 1, 1925. If you do not know the county in which the license was issued, and the marriage occurred July 1, 1925, or later, you may contact this office for assistance.

The fee for one certified copy of a marriage record in the *state* Vital Records office is \$5; additional copies of the same record issued at the same time are \$2 each. The fee for a certified copy at the *county* level is \$10; additional copies of the same record issued at the same time are \$5 each.

Once received in our office, copies are usually mailed in 5 to 7 business days (**this does not include mailing time**). Copies to be sent by Federal Express or UPS are processed the same day, provided the request is in our office by 10:00 a.m. Central Time.

Certified copies **CANNOT** be faxed. The certified copies will be sent by first class mail unless you specify and include the funds for special shipping through **Federal Express** for an **additional \$16.00** (add \$6 for delivery to Alaska or Hawaii) or **UPS** for an **additional \$16.**

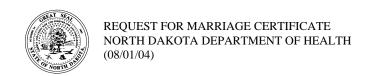
This form may be completed and mailed with fees to:

Vital Records 600 East Boulevard Ave. Dept. 301 Bismarck, ND 58505-0200

If you prefer, you may complete this form and fax it with your **Visa, Master Card,** or **Discover** credit card number and expiration date to (701) 328-1850.

Our web page is at: vitalnd.com

Our email address is: vitalrec@state.nd.us



DISCOVER

****PLEASE PRINT****

INFORMATION REQUIRED TO LOCATE AND IDENTIFY THE RECORD REQUESTED Full Name of Groom Full Maiden Name of Bride Date of Marriage County Where License Issued City Where Married County Where Married For What Purpose is Copy Needed? Your Relationship to Groom/Bride Number of Copies REQUESTER Signature of Requester Printed Name Address City, State & Zip Code Daytime Phone Number (**Required**) MAILING INFORMATION IF COPY TO BE SENT ELSEWHERE Name Address City, State & Zip Code Daytime Phone Number (Required) **SHIPPING INSTRUCTIONS First Class** FedEx (\$16; add \$6 for AK or HI) П FedEx or UPS account numbers are NOT ACCEPTED **UPS (\$16)** \Box Waive signature for FedEx or UPS Delivery П **CREDIT CARD INFORMATION Card Type Card Number** Fees for copies: **VISA** \$5 for one copy; \$2 for each additional copy of the same record ordered at the same **MASTER CARD Expiration Date** time.

If you are mailing your request, please send it to: Division of Vital Records, 600 E. Boulevard Ave., Dept. 301 Bismarck, ND 58505-0200. If you are faxing your request, please dial (701) 328-1850.